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**FROM:** Steven L. Highlander**USER ID:** 01973**FLOOR:** 20**PHONE:** (512) 536-3184**FAX:** (512) 536-4598**RE:** CUSTOMER NO. 32425, Preliminary Amendment**NUMBER OF PAGES WITH COVER PAGE:** 7 Originals Will Not Follow**Message:**

Please enter in the following matter:

U.S. Patent Application No. 08/781,296 entitled "DIAGNOSTICS AND THERAPY OF EPSTEIN-BARR VIRUS IN AUTOIMMUNE DISORDERS," by John Harley et al.

Thank you for your attention to this matter.

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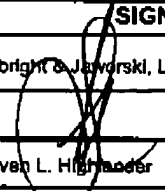
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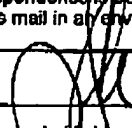
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	08/781,286
	Filing Date	January 13, 1997
	First Named Inventor	John Harley
	Art Unit	1631
	Examiner Name	Lori A. Clow
Total Number of Pages in This Submission	Attorney Docket Number	OMRF:050US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks It is believed that no fee is due for filing this Preliminary Amendment. However, should any fees under 37 C.F.R. §§ 1.16 to 1.21 be required for any reason relating to this document, consider this paragraph such a request and authorization to withdraw the appropriate fee from Fulbright & Jaworski Deposit Account No. 50-1212/OMRF:050US.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Fulbright & Jaworski, LLP	
Signature		
Printed name	Steven L. Highlander	
Date	December 7, 2004	Reg. No. 37,642

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Date	December 7, 2004

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PATENT  
CUSTOMER No. 32425**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

John Harley  
Judith James

Serial No.: 08/781,296

Filed: January 13, 1997

For: DIAGNOSTICS AND THERAPY OF  
EPSTEIN-BARR VIRUS IN  
AUTOIMMUNE DISORDERS

Group Art Unit: 1631

Examiner: Lori A. Clow

Atty. Dkt. No.: OMRP:050US

**MS AMENDMENT**Commissioner for Patents  
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below:December 7, 2004  
Date

Steven L. Highlander

**PRELIMINARY AMENDMENT**

Sir:

Applicants submit this Preliminary Amendment in the above-referenced case.

Consideration of this case in view of the amendments made below is requested.

Amendments to the Claims are reflected in the listing of claims which begins on page 2.

Remarks begin on page 5 of this paper.